RECEIVED

2012 MAY 31 AM 8: 34

FEC MAIL CENTER

Committee Name:

Conservative Action Committee

If registered, FEC ID:

Today's Date:

05/24/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

## To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Abby F. Dupree, CPA

, Treasurer

Contract Contractor

(2) In the control of the source of the relationships to the organizations can consider the control of the c

FEC FORM 1

## STATEMENT OF ORGANIZATION

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FORM 1	URGANIZA	ATION		FEC MAIL CENTER
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	างเลี้ยากรมสำเนาสาการในเลาการสำเนา
Conservative	Action Comm	ittee	<u> </u>	
			<u>                                     </u>	
ADDRESS (number and street)	P.O. Box 11	97		
(Check if address is changed)	Tallahassee		FL	32302
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE				
(Check if address is changed)	adupree@c	CICPA, COMPosition (composition)		110833411
COMMITTEE'S WEB PAGE AD		er era i o en 185 betro e era en 1886 homen afine		on the good against the
(Check if address is changed)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. DATE 05 2	4 2012	inali juga	. <del></del> .	
3. FEC IDENTIFICATION N		nances parameter supplies and processing or a 1 miles of the contract of the c		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined to	Abby F Du	of my knowledge and belief it	is true, correct	and complete.
Signature of Treasurer	alshyti	In OPH	Date 0	5 24 2012
NOTE: Submission of false, erron	eous, er incomplete information i			
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-894-1100		FEC FORM 1 (Revised 02/2009)

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	FEC Fo	rm 1 (Revised 02/2009) Page <b>2</b>					
j.		COMMITTEE					
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)					
	(p)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate						
	Candidate Party Affiliati	on Office Sought: House Senate President District					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate						
	Party Committee:						
	(d)	This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.					
	Political A	ction Committee (PAC):					
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
		Corporation Wo Capital Stock Labor Organization					
		Membership Organization Tratle Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint Fund	Iraising Representative:					
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	<b>3</b> .	FEC ID number					
	4.	FEC ID number					

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Write or Type Committee Nam		
Conservative	Action Committee	
6. Name of Any Connected	Organization; Amiliated Committee, Joint Fundralsing Representative	ve, or Leadership PAC Sponsor
.ΝΙ/Δ		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Represe	ntative Leadership PAC Sponsor
7. Custodian of Records: Id books and records.	entify by name; address (phone number optional) and position of the	person in possession of committee
Abb	y F. Dupree, CPA	
Tun Hamo	2640-A Mitcham Drive	<del> </del>
Mailing Address		
	Tallahasasa	22200
	Tallahassee FL	32300 -
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	850,
8. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committe, assistant treasurer).	ee; and the name and address of
Full Name of Treasurer	y F. Dupree, CPA	
Mailing Address	2640-A Mitcham Drive	
	Tallahassee FL	32308
Title or Position		850  - 877  - 1099

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Full Name of			
Designated Fr Agent	rederick Carroll III, CPA		
Mailing Address	2640-A Mitcham Drive		لــا
			Ш
	¡Tal ahassee	[FL] [32308] -[	لــا
	CITY	STATE ZIP CODE	
Title or Position [Asst., T,reasu	rer Telephone i	number [850] - [877] - [1099	<u>1</u>
9. Banks or Other Deposafety deposit boxes of Name of Bank, Depos		mittee deposits funds, holds accounts, rents	
.9	unTrust Bank,,,,,,,,,,,,,		
<u> </u>		500	
Mailing Address	3522 Thomasville Road, Ste.	500	1
			1
	[Tallahassee]	FL    32309     -	i
	CITY	STATE ZIP CODE	
Name of Bank, Depos	sitory, etc.	,	
L			·
Mailing Address			ı
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	СІТУ	STATE ZIP CODE	

## Federal Election Commission **ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED